TO/58/97 (08-03)

Approved for use through 07/31/2008, OMB 0831-0031
U.S. Patent and Tradement Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it centains a valid OMB control number.

Certificate of Transmission under 37 CFR 1.8

RECEIVED CENTRALIFAX CENTER

JUL 2 1 2008

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

on JULY 21, 2008.

Date

Pat<u>ricia M. Fedoro</u>wyc<u>z</u> Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

ATTENTION: OFFICE OF PETITIONS Mail Stop PETITION

ATTACHED - PETITION TO REVIVE (PTO/SB/64);

- RESPONSE UNDER 37 CFR 1.111 (10 pages); and

- FEE TRANSMITTAL (PTO/SB/17), in duplicate.

CUSTOMER NO.: 24498

Serial No.:

10/561,361

Docket No.:

PU030180

Art Unit:

2621

Examiner:

Jessica M. Roberts

TOTAL NUMBER OF PAGES INCLUDING THIS SHEET: 15

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND

PTO/SB/17 (01/05)
Approved for use through 07/61/2006. OMB 0851-0032
U.S. Pelant and Trademark Officer U.S. DEPARTMENT OF COMMERCE
Under the Perpension Reduction Act of 1995 no persons are required to respond to a collection of information unless is displays a valid OMB control number

	Complete If Known					hen			
Fees pursuant to the C	Appileation Number 10/561,361				110000	VED			
FEE T	Filing Date		ember	19, 2005	CENTRAL FA	CEM			
for FY 2007				First Named Inv	antor Jill	Jill MacDonald Boyce			200
	101112						Roberts	JOE 2	1 200
				Examiner Name	262				1
☐ Applicant claim	ns small entity	status. See 3	7 CFR 1.27	Art Unit					,
JOTAL AMOUNT O	F PAYMENT	(\$) \$154	0.00	Attorney Docket	No. PU	30180			٦
		CUETO	MED NIIME	BER: 24498					<u></u>
ETHOD OF PAYMENT	check ell that app	Money On		None		her (pteas	e identify):		7
Deposit Accounting the provided in the provide	nt: Deposit Acce entified deposit ee(s) Indicate my additional 37 CFR 1.16 n on this form m rtzation on PTO	um Number <u>07</u> ; account, the I d below fee(s) or und and 1.17 ay become pub- 2038.	<u>-0832</u> Director is herel derpayments of tic. Credit card I	☐ Charge of ☑ Credit Information shoul	(check all the fee(s) income any overpand on the local contraction of t	hat apply licated b ayments uded on t) elow, exc	LICENSING LLC apt for the filing fee	
EE CALCULATION	(All the fees	below are due	upon filing o	r may be subjec	t to a surc	narge.)			4
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity			CH FEES Small Entity		FAMIMAX	TON FEES <u>Small</u>	Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)		<u>(\$)</u>	Fee (\$)	Fees Paid (\$)	
Jtility	300	150	500	250	_	00	100		
Design	200	100	100	50		30	65		1
Plant	200	100	300	150		60	80		
Reissue	300	150	500	250	. 6	00	300		
Provisional	200	100	0	0		0	0		Ì
2. EXCESS CLAIM	CEEC						Sma	II Entity	
Fee Description	FEEG					Fee) (\$)	<u>Fee (\$)</u>	
Each claim over 20 (inc	duding Reissues)					_	0	25	1
Each Independent clain						20		100 180	
Multiple dependent clai			- (2)	5 D-(4/5)		36		ndent Claims	-
Total Claims		tra Claims	<u>Fee (\$)</u>	Fee Paid (\$)			(\$)	Fee Paid (\$)	j
- 20 HP = highest number o	or MP = total ctaims paid	d for, it greater th	an 20.	-					1
	_		Fee (\$)	Fee Paid (\$	١				
Independent Claim	<u>\$EX</u> or HP =	tra Clalms	х <u>гве (а)</u>	-	_				
HP = highest number o	f independent ci	alms paid for, if g	reater than 3.		_				1
3. APPLICATION S	IZE FEE								
If the specification a listings under 37 CF sheets or fraction th	nd drawings ex	spolication size	e fee due is \$2	250 (\$125 for sm	ically filed s all entity) fo	equence r each ad	or compute ditional 50		
Total Sheets	Extra Sh	eets · <u>N</u>	umber of eacl	h additional 50	or fraction	<u>hereof</u>	Fee (S	Fee Paid (\$)	
100 ±		/ 50 =	(rc	ound up to a who	ole number)	×		=	
4. OTHER FEE(S Non-English Specifi	cation. \$130 fe	e (no small en	tity discount)				•	Fees Pald (\$	
Other (e.g., late filin	a autobama)·E	EE FOR PETI	TION FOR REY	VIVAL OF AN A ALLY UNDER 3	PPLICATIO 7 CFR 1.13	N FOR P 7(b)	ATENT	\$1540.00	
SUBMITTED BY									\equiv
	JEFFREY R	M NAVON	Registration No.	1 32	2,711	Telepi	none (60	9) 734-6823	i
Name (Print/Type)	JEFFRETE		(Attorney/Agent)	7	• • • • • • • • • • • • • • • • • • • •	+		ly 21, 2008	-
Signature	1	./	1//			1		., = ., =	

OTO/SB/17 (01/08)

PTURSARY (BUVO)
Approved for use through 07/31/2000. OMB 0813-0032
U.S. Petent and Tradement Office; U.S. DEPARTMENT OF COMMERCE
to a collection of information unless it displays a valid OMB control number Under the Expensers Reduction Aid of 1995 no persons are required to respond to a collection RECEIVED CENTRAL FAX CENTER Complete If Known Feas pursuant to the Consubdated Appropriations Act, 2005 (H.R. 4819). 10/561,361 Application Number L 2 1 2008 FEE TRANSMITTAL December 19, 2005 Filing Date Jili MacDonald Boyce for FY 2007 First Named Inventor Jessica M. Roberts Examiner Name 2621 Applicant claims small entity status. See 37 CFR 1.27 Art Unit PU030180 Attorney Docket No \$1540.00 JOTAL AMOUNT OF PAYMENT (5) CUSTOMER NUMBER: 24498 METHOD OF PAYMENY (check all that apply) Other (plasse identify): ☐ None ☐ Credit card ☐ Money Order Check THOMSON LICENSING LLC Deposit Account: Deposit Account Number 07-0832 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ☐ Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below ☑ Charge any additional fee(s) or underpayments of WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** SEARCH FEES Small Entity Small Entity FILING FEES Small Entity Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Application Type 100 200 250 500 150 300 65 Utility 130 50 100 100 200 80 160 Design 150 300 100 200 300 Plant 600 250 500 150 300 Reissuè 0 n 0 100 200 Provisional Small Entity Fee (\$) 2. EXCESS CLAIM FEES. Fee (\$) 25 Fee Description 50 100 Each claim over 20 (including Reissues) 200 Each independent claim over 3 (including Reissues) 180 380 Multiple Dependent Claims Mulliple dependent claims Fee Pald (\$) Fee (\$) Extra Claims Fee Paid (\$) Total Claims Fea (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Fee (\$) Extra Claims Independent Claims - 3 or HP = HP = highest number of Independent dalms paid for, if greater than 3. If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Fee (\$) Number of each additional 50 or fraction thereof Extra Sheets <u>Total Sheets</u> (round up to a whole number) x / 50 = - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filling surcharge): FEE FOR PETITION FOR REVIVAL OF AN APPLICATION FOR PATENT \$1540.00 ABANDONED UNINTENTIONALLY UNDER 37 CFR 1,137(b) SUBMITTED BY (609) 734-6823 Ragistration No. (Attithey/Agarif) Telephone 32,711 JEFFREY M. NAVON Name (Print/Type) July 21, 2008

Signature

which is to file (and by the USPTO to process) an application. Confidentiality, preparing, and subplicing the completed application form to the USPTO, or suppositions for reducing this burden, should be sent to the Chief or suppositions for reducing this burden, should be sent to the Chief. This collection of information is required by 37 CFR 1,128. The information is require governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to late. Time will vary depending upon the information Chief. Comments on the amount information Chief. U.S. Paters and Tracement Office, U.S. Department of Comments. nis form and/or suppositions for reducing this burden, effourbly VA 22313-1450, DO NOT SEND FEES OR COMPLETED (projeting the form, call 1-600-PTC-9199 and select option 2